

COMMISSION ON GOVERNMENTAL ETHICS AND ELECTION PRACTICES Mail: 135 State House Station, Augusta, Maine 04333 Office: 45 Memorial Circle, Augusta, Maine

Date

Website: www.maine.gov/ethics Phone: 207-287-4179 Fax: 207-287-6775

## **2012 CAMPAIGN FINANCE REPORT**

	State Party Committe e complete ALL entries				
	NAME OF COMMITTEE				
	STREET				☐ CHECK IF CHANGED
	CITY AND ZIP CODE		TELEPHONE NUMBER		FROM PREVIOUS REPORT
	E-MAIL				
	NAME OF TREASURER				
	MAILING ADDRESS STREET				☐ CHECK IF CHANGED
	CITY AND ZIP CODE		TELEPHONE NUMBER		FROM PREVIOUS REPORT
	E-MAIL				
Ty	pe of Report	<u>Due Date</u>	Dates of Re	eport Period	
	April Quarterly	April 10, 2012	January 1, 2	012 — March 31, 2012	
	11-Day Pre-Primary	June 1, 2012	April 1, 2012	— May 29, 2012	
	42-Day Post-Primary	July 24, 2012	May 30, 201	2 — July 17, 2012	
	October Quarterly	October 5, 2012	July 18, 201	2 — September 30, 2012	
	11-Day Pre General	October 26, 2012	October 1, 2	012 — October 23, 2012	
	42-Day Post-Genera	December 18, 2012	October 24,	2012 — December 11, 20	)12
	January Quarterly	January 15, 2013	December 1	2, 2012 — December 31, 2	2012
	Amendment to:				
		Jse only if the committee had no cogations during the reporting period			incur any
	Termination Report:	If the committee will have no furth	er activity. Check the a	appropriate report abov	e as well.
	ERTIFY THAT I HAVE PRRECT, AND COMPL	EXAMINED THIS REPORT AND TO	THE BEST OF MY KNO	OWLEDGE IT IS TRUE,	

Treasurer's Signature

Partv	/ Name		

Page	of
Sche	dule A only

## SCHEDULE A CASH CONTRIBUTIONS

- For contributors who gave more than \$200, the committee must report the contributor's name, address, occupation, and employer.
- If employment information has been requested from the contributor and the contributor has not provided it, indicate "information requested" for the occupation and employer.
- For cash contributions totaling \$200 or less, please enter "unitemized contributions" as the contributor and the total amount and the appropriate key code on a line on this page. Once a contributor has given the committee more than \$200 in a report period, you must list that contributor separately.

DATE RECEIVED	CONTRIBUTOR'S NAME, ADDRESS, ZIP	OCCUPATION AND EMPLOYER	TYPE (use key code)	AMOUNT	
Total cash contributions (this page only) ⇒ (combined totals from all Schedule A pages must be listed on Schedule F)					

Key Codes:

1 = Individuals 4 = Party Committee

2 = Commercial Source 5 = Candidate Committees

3 = Political Action Committees 6 = Unitemized Contributions of \$200 or less

Duplicate as needed.

Party Name	

Page _	of	
Sch	edule A On	ly

# SCHEDULE A (continued) CASH CONTRIBUTIONS

			TYPE		
DATE RECEIVED	CONTRIBUTOR'S NAME, ADDRESS, ZIP	OCCUPATION AND EMPLOYER	(use key code)	AMOUNT	
Total cash contributions (this page only) ⇒ (combined totals from all Schedule A pages must be listed on Schedule F)					

Key Codes:

1 = Individuals 4 = Party Committee

2 = Commercial Source 5 = Candidate Committees

3 = Political Action Committees 6 = Unitemized Contributions of \$200 or less

	Page of
Party Name	Schedule A-1 Only

# SCHEDULE A-1 IN-KIND CONTRIBUTIONS

- In-kind contributions are goods and services (including facilities) that a committee received at no cost or at a cost less than the fair market value. They include all goods and services purchased for the committee by others if the committee does not expect to reimburse the person who made the purchase.
- For contributors who gave more than \$200, the contributor's name, address, occupation, and employer must be reported.
- If employment information has been requested from the contributor and the contributor has not provided it, indicate "information requested" for the occupation and employer.
- For cash contributions totaling \$200 or less, please enter "unitemized contributions" as the contributor and the total amount and the appropriate key code on a line on this page. Once a contributor has given the committee more than \$200 in a report period, you must list that contributor separately.

DATE RECEIVED	CONTRIBUTOR'S NAME, ADDRESS, ZIP	OCCUPATION AND EMPLOYER	DESCRIPTION (of goods, services, facilities, or discounts received)	TYPE (use key code)	VALUE (estimated fair market value)	
Total in-kind contributions (this page only) ⇒ (combined totals from all Schedule A-1 pages must be listed on Schedule F)						

**Key Codes:** 

1 = Individuals

4 = Party Committee

2 = Commercial Source

5 = Candidate Committees

3 = Political Action Committees

6 = Unitemized Contributions of \$200 or less

Duplicate as needed.

Party	/ Name			

Page	of
Sche	edule B Only

# SCHEDULE B EXPENDITURES TO SUPPORT OR OPPOSE

- Enter all expenditures, including cash contributions from this committee, made to support or oppose a candidate, political action committee, ballot question committee, or party committee.
- Enter all expenditures made to support or oppose a ballot question, referendum, or citizen initiative, including those in signature-gathering phase.
- Enter the name of the candidate, ballot question, or committee supported or opposed by the expenditure and indicate whether the expenditure was made in support or opposition.

If a single expenditure is made to support or oppose multiple candidates, committees, or ballot questions, the expenditure must be itemized by the amount spent per candidate, committee, or question, not as a single expenditure, and each candidate, committee, or ballot question must be identified.

		EX	(PENDITU	JRE TY	PES		
CON	Cor	ntribution to candidate, party or committee		POL	Polling and survey research		
CNS	Car	mpaign consultants		POS	Postage for U.S. Mail and mail box fees		
EQP	Equ	uipment (office machines, furniture, cell phones)		PRO	Professional services		
FND	Fur	ndraising events		PRT	Print media ads only (newsp	apers, mag	azines, etc.)
FOD	Foo	od for campaign events, volunteers		RAD	Radio ads, production costs		
LIT	Prir	nting and graphics (flyers, signs, palmcards, t-shirts	, etc.)	SAL	Campaign workers' salaries	and person	nel costs
MHS	Ма	il house (all services purchased)		TRV	Travel (fuel, mileage, lodging	g, etc.)	
OFF	Offi	ice rent, utilities, phone and internet services, suppl	ies	TVN	TV or cable ads, production	costs	
ОТН	Oth	ner		WEB	Website design, registration	hosting, ma	aintenance, etc.)
РНО	Pho	one banks, automated telephone calls					
		Only these expenditure ty	pes require	a remar	k: CNS, OTH, PRO and SAL		
DAT	E	PAYEE'S NAME AND ADDRESS		F	REMARKS	TYPE	AMOUNT
		Payment to support □ or to oppose □:					
			1				
		Payment to support □ or to oppose □:					
		Payment to support □ or to oppose □:	<u>I</u>				
Payment to support □ or to oppose □:							
			7	Total e	xpenditures this page (	only ⇒	
		(combined totals from all Sci					

Duplicate as needed. rev. 03/06/2012

Party Name	

Page	of
Sche	edule B Only

# SCHEDULE B (continued) EXPENDITURES TO SUPPORT OR OPPOSE

DATE	PAYEE'S NAME AND ADDRESS	REMARKS	TYPE	AMOUNT
	Payment to support □ or to oppose □:			
	Payment to support □ or to oppose □:			
	Payment to support □ or to oppose □:			
	Payment to support □ or to oppose □:			
	Payment to support □ or to oppose □:			
	Payment to support □ or to oppose □:			
		Total expenditures this page of	onlv ⇒	
	(combined totals from all Sc.	hedule B pages must be listed on Sche	edule F)	

Party Name	

⊃age	of
Schedu	ıle B-1 Only

# SCHEDULE B - 1 OPERATING EXPENSES

List all expenditures made to a single payee or creditor aggregating in excess of \$50 for this election and that were made during this reporting period. Expenditures of \$50 or less for this election may be aggregated and listed as a lump sum.

	EXPENDITURE TYPES				
CON	Contribution to candidate, party or committee	POL	Polling and survey research		
CNS	Campaign consultants	POS	Postage for U.S. Mail and mail box fees		
EQP	Equipment (office machines, furniture, cell phones)	PRO	Professional services		
FND	Fundraising events	PRT	Print media ads only (newspapers, magazines, etc.)		
FOD	Food for campaign events, volunteers	RAD	Radio ads, production costs		
LIT	Printing and graphics (flyers, signs, palmcards, t-shirts, etc.)	SAL	Campaign workers' salaries and personnel costs		
MHS	Mail house (all services purchased)	TRV	Travel (fuel, mileage, lodging, etc.)		
OFF	Office rent, utilities, phone and internet services, supplies	TVN	TV or cable ads, production costs		
ОТН	Other	WEB	Website design, registration, hosting, maintenance, etc.)		
РНО	Phone banks, automated telephone calls				
Only these expenditure types require a remark: CNS, OTH, PRO and SAL.					

DATE	PAYEE NAME & ADDRESS	TYPE	REMARK (if the expenditure type requires a remark, describe all goods and services purchased)	AMOUNT

Duplicate as needed. rev. 03/06/2012

Total expenditures (this page only)  $\Rightarrow$  (combined totals from all Schedule B-1 pages must be listed on Schedule F)

Dort	, Nama	
Party	/ Name	

Page	of _	
Schedule	B-1	Only

# SCHEDULE B-1 (continued) OPERATING EXPENDITURES

DATE	PAYEE NAME & ADDRESS	TYPE	REMARK (if the expenditure type requires a remark, describe all goods and services purchased)	AMOUNT
Total expenditures (this page only) ⇒ (combined totals from all Schedule B-1 pages must be listed on Schedule F)				

Duplicate as needed.

Page \_\_\_\_ of \_\_\_ Schedule C Only

# SCHEDULE C LOANS AND REPAYMENTS

List all new and continuing loans that were unpaid at any time during this reporting period. If a loan amount is forgiven, the amount forgiven **must** also be entered as a contribution on Schedule A.

	COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5
LENDER'S NAME	LOAN BALANCE AT BEGINNING OF PERIOD	A (re	LOAN BALANCE AT		
AND ADDRESS		AMOUNT LOANED THIS PERIOD	AMOUNT REPAID THIS PERIOD	AMOUNT FORGIVEN THIS PERIOD (Enter on Schedule A also)	END OF PERIOD (1+2) – 3 – 4
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
		DATE	DATE	DATE	
		AMOUNT	AMOUNT	AMOUNT	
Totals for each column ⇒		Enter on Schedule F, Line 3	Enter on Schedule F, Line 7		Enter on Schedule F, Line 14

Party	/ Name			

Page	of
Sche	edule D Only

## SCHEDULE D UNPAID DEBTS AND OBLIGATIONS

- A debt or obligation is incurred if a committee places an order for a good or service without making a payment; makes a promise or agreement to pay for a good or service; signs a contract for a good or service; or receives delivery of a good or service for which the committee has not paid.
- This schedule is a list of all debts and obligations of the committee as of the end of this reporting period. When the obligation has been paid, the expenditure (i.e., the actual payment) must be reported on Schedule B or B-1.
- If the committee has not received a bill for goods or services, contact the vendor to obtain the amount owed. If it is impossible to verify the amount of the debt, enter an estimated amount and indicate that the amount is estimated in the purpose section.
- If obligations from a previous campaign finance report still remain unpaid, you will need to continue to report them on this schedule until they have been paid in full.

DATE OF OBLIGATION	CREDITOR'S NAME AND ADDRESS	PURPOSE	AMOUNT
Total unpaid debts and obligations (this page only) ⇒ (combined totals from all Schedule D pages must be listed on Schedule F)			

Duplicate as needed. rev. 03/06/2012

Party Name	
------------	--

## **SCHEDULE F SUMMARY SCHEDULE**

#### **CASH ACTIVITY**

Receipts	Total for this Period
1. Cash Contributions (Schedule A)	
2. Other Cash Receipts (interest, etc.)	
3. Loans (Schedule C)	
4. Total Receipts (lines 1 + 2 + 3)	
Expenditures	Total for this Period
5. Expenditures to Support or Oppose (Schedule B)	
6. Operating Expenditures (Schedule B-1)	
Operating Expenditures (Schedule B-1)      Loan Repayment (Schedule C)	

#### CASH SUMMARY

	Total for This Period
9. Cash Balance at Beginning of Period	
10. Plus Total Receipts This Period (line 4 above)	
11. Minus Total Payments This Period (line 8 above)	
12. Cash Balance at End of Period	

### **OTHER ACTIVITY**

	Total for This Period
13. In-Kind Contributions (Schedule A-1)	
14. Total Loan Balance at End of Period (Schedule C)	
15. Total Unpaid Debts at End of Period (Schedule D)	

Duplicate as needed. rev. 03/06/2012